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**Substitute for form 1449/PTO**

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*(Use as many sheets as necessary)*

Sheet 1 of 2

**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	<b>SONIA CHOKSHI</b>
Art Unit	
Examiner Name	
Attorney Docket Number	<b>NONE</b>

Sheet 1 of 2

**Case Number** Docket Number **NONE**

## **U. S. PATENT DOCUMENTS**

## **FOREIGN PATENT DOCUMENTS**

Examiner Signature		Date Considered	
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## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

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**Sheep**

2

4

2

**Complete If Known**

Application Number	
Filing Date	
First Named Inventor	SONIA CHOKSHI
Art Unit	
Examiner Name	
Attorney Docket Number	NONE

## NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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